



## PONDEROSA FIRE DEPARTMENT

11951 W. Shadow Mountain Drive  
Bellemont, AZ 86015  
P: 928-773-8933 | F: 928-773-8927

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Box Number or Street City State Zip

Physical Address: \_\_\_\_\_  
Street City State Zip

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Are you a U.S. citizen?  Yes  No

If not, are you authorized to work in the U.S.?  Yes  No

Are you 18 years of age or older?  Yes  No

Do you have a valid Driver's License?  Yes  No DLN: \_\_\_\_\_  
Type (CDL): \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Do you have dependable transportation?  Yes  No

Please list and explain any other names you have used: \_\_\_\_\_  
\_\_\_\_\_

### MILITARY SERVICE

Have you served in the U.S. Military?  Yes  No If yes, please fill out the lines below.  
Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Rank at Discharge: \_\_\_\_\_  
If other than honorable, please explain: \_\_\_\_\_  
\_\_\_\_\_

### AVAILABILITY

Sunday  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  
Are you willing to work:  24-hour shifts  Nights  Weekends  
List any limitations to your availability: \_\_\_\_\_  
\_\_\_\_\_



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### EDUCATION

Do you have a high school diploma or GED?  Yes  No

If you have attended college, please fill out the lines below.

Course of Study: \_\_\_\_\_ How many years did you complete? \_\_\_\_\_

Did you graduate?  Yes  No

Please list any languages that you speak fluently: \_\_\_\_\_

### FIREFIGHTER TRAINING/CERTIFICATIONS

	Date Completed		Date Completed
Firefighter I		Wildland Cert.	
Firefighter II		HAZMAT	
Fire Science Cert.		CPR/First Aid	
EMT		Paramedic	

Please list any other special skills or training that may be useful to the Fire District: \_\_\_\_\_

**PREVIOUS EMPLOYMENT** – Please list your employment for the last five years from most to least recent.

Employer Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

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Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Duties and Responsibilities: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### REFERENCES – Professional or personal.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

How did you hear about Ponderosa Fire District? \_\_\_\_\_

Within the past year, have you used any illegal substances or any prescription medications without a doctor's prescription?  Yes  No

Do you possess or have ever possessed a medical marijuana card?  Yes  No

If so, do you currently have a doctor's prescription?  Yes  No



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Have you ever been convicted of a felony or misdemeanor?  Yes  No

Do you have an alcohol or substance abuse problem?  Yes  No

If yes, please explain: \_\_\_\_\_

Do you regularly take any prescription medication or other drug that may affect your work?

Yes  No      If yes, please explain: \_\_\_\_\_

Do you have any limitations that would affect your ability to perform the physical activities required of a firefighter?  Yes  No

If yes, please describe the limitations or accommodations required: \_\_\_\_\_

### **APPLICANT'S RELEASE AND AGREEMENT STATEMENT**

As an employee for Ponderosa Fire District, I am willing to furnish information for the determination of my qualifications. In connection with this application, I authorize all corporations, companies, credit agencies, education institutions, persons, law enforcement agencies, military services, and former employers to release information that they may have about me to Ponderosa Fire District, and I release them of any liability for doing so. I specifically waive any right I have under ARS §23-136.B to receive or examine a copy of any written communication regarding employment furnished by any former or current employer of mine. This authorization shall be valid for this and any future reports that may be requested. I hereby release Ponderosa Fire District and all persons from liability or damages that may result from furnishing the information requested.

I certify that the facts contained in this application are true, correct, and complete to the best of my knowledge. I realize any falsification (misrepresentation or omission of information) or incorrect information may disqualify me from becoming an employee or volunteer at Ponderosa Fire District, and is basis for dismissal.

In consideration for my employment or volunteer service, I agree to conform to Ponderosa Fire District's policies, practices, rules, regulations, and guidelines, which may change from time to time. I agree to help maintain a positive work atmosphere, promote good working relationships by respecting others' rights as individuals, encourage open communications between my coworkers, and to communicate in a professional manner with customers, clients, coworkers, and supervisors.



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Ponderosa Fire District is a smoke free workplace and promotes the health and safety of all employees, visitors, and members of the public. I agree to conform to Ponderosa Fire District's tobacco use policies.

In further consideration of my employment or volunteer service, I understand and agree that there are other forms, statements, and provisions that must be completed and agreed to, and those forms, statements, and provisions will be part of this application and will be included within my personnel records. I further understand and agree that if I am employed or become a volunteer for Ponderosa Fire District, I will have no expectation of privacy in desks, lockers, vehicles, or any other property owned by Ponderosa Fire District, and I will abide by all electronic, social media, and computer policies.

I further agree that the terms and benefits provided to me by Ponderosa Fire District are not intended to, and do not constitute any contractual relationship, is for no definite period of time, and can be terminated by myself or Ponderosa Fire District without notice or cause.

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Applicant's Signature

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Date